

PLAN SUBMISSION CHECKLIST

[ SEE DEQ GUIDANCE MEMO NO. 22-2012 FOR ADDITIONAL INSTRUCTIONS ]

A. APPLICATION TYPE

\_\_\_ INITIAL SUBMISSION  
\_\_\_ RESUBMISSION  
\_\_\_ MODIFICATION with ACREAGE INCREASE  
\_\_\_ MODIFICATION without ACREAGE INCREASE

DEQ PLAN # : \_\_\_\_\_  
DEQ PLAN # : \_\_\_\_\_  
DEQ PLAN # : \_\_\_\_\_

B. DESIGN PROFESSIONAL

CONTACT NAME:  
MAILING ADDRESS:  
TELEPHONE NO:  
EMAIL ADDRESS:

C. PROJECT DEVELOPER

PROJECT DEVELOPER:  
CONTACT NAME:  
MAILING ADDRESS:  
TELEPHONE NO:  
EMAIL ADDRESS:

D. PROPERTY OWNER

PROPERTY OWNER:  
CONTACT NAME:  
MAILING ADDRESS:  
TELEPHONE NO:  
EMAIL ADDRESS:

E. PROJECT INFORMATION

PROJECT NAME:  
ADDRESS (911 ADDRESS IF AVAILABLE):  
COUNTY (IF NOT LOCATED WITHIN A CITY):  
TAX MAP NO. (OR GPIN):  
LATITUDE (6 DIGITS, DECIMAL DEGREES):  
LONGITUDE (6 DIGITS, DECIMAL DEGREES):  
TOTAL LAND AREA OF DEVELOPMENT (1/100th ACRE):  
ESTIMATED AREA TO BE DISTURBED (1/100th ACRE):  
PROJECT STATUS: \_\_\_ FEDERAL \_\_\_ STATE  
PART OF A LARGER COMMON PLAN OF DEVELOPMENT? \_\_\_ YES \_\_\_ NO  
OFFSITE IMPROVEMENTS PROPOSED? \_\_\_ YES \_\_\_ NO

F. OFFSITE SUPPORT ACTIVITY INFORMATION

OFFSITE SUPPORT ACTIVITY NAME:  
ADDRESS (911 ADDRESS IF AVAILABLE):  
COUNTY (IF NOT LOCATED WITHIN A CITY):  
TAX MAP NO. (OR GPIN):  
LATITUDE (6 DIGITS, DECIMAL DEGREES):  
LONGITUDE (6 DIGITS, DECIMAL DEGREES):  
ESTIMATED AREA TO BE DISTURBED (1/100th ACRE):

G. PLAN INFORMATION

GENERAL PLAN INFORMATION	SHEET NO.
1. VICINITY MAP	
2. NORTH SCALE	
3. PLAN LEGEND	
4. PLAN SCALE	
5. SHEET INDEX	

PRE-DEVELOPMENT SITE INFORMATION	SHEET NO.
6. NARRATIVE OF PRE-DEVELOPMENT SITE CONDITIONS	
7. EXISTING PROPERTY BOUNDARIES (INC. LEASE BOUNDARIES)	
8. EXISTING TOPOGRAPHY (EXISTING CONTOURS)	
9. EXISTING STREAMS, PONDS, DITCHES, WETLANDS & OTHER WATERS	
10. EXISTING KARST FEATURES	
11. EXISTING 100-YEAR FEMA FLOODPLAIN	
12. RESOURCE PROTECTION AREAS	
13. EXISTING IMPROVEMENTS (BUILDINGS, ROADS, PARKING & UTILITIES)	
14. EXISTING VEGETATIVE AREAS (FOREST, OPEN SPACE & TURF)	
15. EXISTING LAND COVER / USE TABULATION	
16. EXISTING EASEMENTS (DEED BOOK/PAGE REF. OR INSTRUMENT #)	
17. PRE-DEV. DRAINAGE AREAS (ACREAGE, DIVIDES & FLOW PATHS)	

POST-DEVELOPMENT SITE INFORMATION	SHEET NO.
18. NARRATIVE OF POST-DEVELOPMENT SITE CONDITIONS	
19. PROPOSED PROPERTY BOUNDARIES (INC. LEASE BOUNDARIES)	
20. PROPOSED LIMITS OF LAND DISTURBANCE (CLEARING & GRADING)	
21. PROPOSED GRADING (PROPOSED CONTOURS INC. SWM PRACTICES)	
22. PROPOSED 100-YEAR FLOODPLAIN	
23. PROPOSED IMPROVEMENTS (BLDGS, ROADS, PARKING & UTILITIES)	
24. PROPOSED VEGETATIVE AREAS (FOREST, OPEN SPACE & TURF)	
25. PROPOSED LAND COVER / USE TABULATION	
26. PROPOSED EASEMENTS	
27. POST-DEV. DRAINAGE AREAS (ACREAGE, DIVIDES & FLOW PATHS)	

EROSION & SEDIMENT CONTROL INFORMATION	SHEET NO.
28. NARRATIVE OF PROP. EROSION & SEDIMENT CONTROLS	
29. MINIMUM STANDARDS (9VAC25-840-40)	
30. CRITICAL EROSION AREAS (VESCH, CHAPTER 6)	
31. PROP. EROSION & SEDIMENT CONTROLS (VESCH, CHAPTER 3)	
32. EROSION & SEDIMENT CONTROL DETAIL DRAWINGS	
33. HYDROLOGIC & HYDRAULIC COMPUTATIONS	
34. INSPECTION, OPERATION & MAINTENANCE REQUIREMENTS	

G. PLAN INFORMATION (CONT.)

POST-DEVELOPMENT WATER QUANTITY & WATER QUALITY INFO.	SHEET NO.
35. NARRATIVE OF PROP. SWM FACILITIES / PRACTICES	
36. PROP. SWM FACILITIES / PRACTICES	
37. HYDROLOGIC & HYDRAULIC COMPUTATIONS *	
38. LONG-TERM INSP., OPERATION & MAINTENANCE REQUIREMENTS	
39. OUTFALL SUMMARY TABLE WITH PRE, POST, AND ALLOWABLE DISCHARGE RATES USED FOR QUANTITY ASSESSMENT; IDENTIFY THE TYPE OF CONVEYANCE SYSTEM AT EACH POINT OF DISCHARGE	

\* STORM DRAIN DESIGN COMPUTATIONS AND HYDRAULIC GRADE LINE COMPUTATIONS SHOULD BE PROVIDED AND SHOULD INCLUDE EACH PIPE SEGMENT. IN ADDITION, STORM SEWER LONGITUDINAL PROFILES WITH HYDRAULIC GRADE LINE ELEVATIONS SHOULD BE INCLUDED FOR VISUAL REPRESENTATION. DESIGN CALCULATIONS AND CROSS-SECTIONS SHOULD BE PROVIDED FOR ALL OPEN MANMADE CHANNELS. CROSS-SECTIONS SHOULD SHOW AND LABEL THE 1-YEAR, 2-YEAR, AND 10-YEAR WATER SURFACE ELEVATIONS.

SOILS & GEOTECHNICAL INFORMATION	SHEET NO.
40. SOILS MAP (INC. NRCS SOIL TYPES)	
41. SOILS TABULATION	
42. GEOTECHNICAL INVESTIGATION / REPORT	

OTHER SUPPORTING INFORMATION	SHEET NO.
43. BOUNDARY SURVEY (18VAC10-20-370)	
44. PHYSICAL IMPROVEMENT SURVEY (18VAC10-20-380)	
45. TOPOGRAPHIC SURVEY (18VAC10-20-382)	

H. LAND COVER TABULATION

EXISTING LAND COVER / USE	ACRES
1. IMPERVIOUS COVER	
IMPERVIOUS COVER (% OF TOTAL LAND AREA OF DEVELOPMENT)	
2. MANAGED TURF	
3. OPEN SPACE	
4. FOREST COVER	
5. PRIME FARMLAND (NRCS FARMLAND CLASSIFICATION)	

PROPOSED LAND COVER / USE ("SITE" TAB OF VRRM SPREADSHEET)	ACRES
1. IMPERVIOUS COVER	
IMPERVIOUS COVER (% OF TOTAL LAND AREA OF DEVELOPMENT)	
2. MANAGED TURF	
3. OPEN SPACE	
4. FOREST COVER	

I. SOILS TABULATION

MAP UNIT SYMBOL	MAP UNIT NAME	HSG	K FACTOR	ERODIBILITY	ACRES IN LOD	% OF LOD

J. EROSION & SEDIMENT CONTROL

ESC PLAN VARIANCE REQUEST: \_\_\_ YES \_\_\_ NO

IF "YES", PLEASE PROVIDE JUSTIFICATION FOR THE VARIANCE REQUEST:

K. STORMWATER MANAGEMENT

APPLICABLE DESIGN CRITERIA: \_\_\_ PART II B  
\_\_\_ PART II C (GRANDFATHERING)  
\_\_\_ PART II C (TIME LIMITS ON APPLICABILITY)  
\_\_\_ "SAFE HARBOR"

OFFSITE COMPLIANCE OPTION(S)? \_\_\_ YES \_\_\_ NO

IF "YES", PLEASE DESCRIBE THE OFFSITE COMPLIANCE OPTION(S):

DISCHARGE TO A KARST FEATURE(S)? \_\_\_ YES \_\_\_ NO

IF "YES", PLEASE DESCRIBE THE KARST FEATURE(S):

IF "YES", PLEASE DESCRIBE ANY KNOWN NATURAL HERITAGE RESOURCES IN THE KARST FEATURE(S):

SWM PLAN EXCEPTION REQUEST? \_\_\_ YES \_\_\_ NO

IF "YES", PLEASE PROVIDE THE JUSTIFICATION FOR THE EXCEPTION REQUEST:

L. STORMWATER MANAGEMENT FACILITIES / PRACTICES

FACILITY NO.	FACILITY TYPE	LAT.	LONG.	REC. WATER	TOT. ACRES TREATED	IMP. ACRES TREATED	PLAN SHEET NO.

M. OWNER / DEVELOPER CERTIFICATION

I hereby certify that coverage under the General VPDES Permit for Discharges of Stormwater from Construction Activities will be obtained, if required, prior to commencing land-disturbing activities.

I hereby certify that all wetlands permits required by law will be obtained, if required, prior to commencing land disturbing activities.

I hereby certify that permission to construct any offsite improvements, if proposed, will be obtained prior to commencing land disturbing activities.

I hereby certify that all offsite nonpoint source nutrient credits will be obtained, if proposed, prior to commencing land disturbing activities.

I hereby certify that construction record drawings (as-built drawings) for all permanent stormwater management facilities/practices will be prepared and submitted to DEQ prior to project closeout. The construction record drawings will be appropriately sealed and by a professional registered in the Commonwealth of Virginia, certifying that the stormwater management facilities/practices have been constructed in accordance with the approved plan(s).

I hereby certify that a long-term maintenance agreement(s) for all permanent stormwater management facilities/practices and other techniques specified to manage the quality and quantity of runoff will be submitted to DEQ, if required, prior to project closeout. The long-term maintenance agreement(s) will be recorded in the local land records prior to termination of coverage under the General VPDES Permit for Discharges of Stormwater from Construction Activities.

OWNER / DEVELOPER NAME:

OWNER / DEVELOPER TITLE:

SIGNATURE:

DATE:

N. DESIGN PROFESSIONAL CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

I hereby certify that the plans and hydrologic & hydraulic computations herein are in compliance with the Stormwater Management Act and attendant regulations, the Erosion and Sediment Control Law and attendant regulations, and applicable DEQ guidance.

DESIGN PROFESSIONAL NAME:

LICENSE NO.:

SIGNATURE:

DATE:

O. DUAL COMBINED ADMINISTRATOR (DCA) CERTIFICATION

[ INCLUDE THIS SECTION / CERTIFICATION IF REQUESTING A STREAMLINED PLAN REVIEW IN ACCORDANCE WITH DEQ GUIDANCE MEMO NO. 22-2011, OTHERWISE DELETE ]

I hereby certify that I have reviewed the plans and hydrologic & hydraulic computations herein for compliance with the Stormwater Management Act and attendant regulations, the Erosion and Sediment Control Law and attendant regulations, and applicable DEQ guidance, and recommend the plans and computations for DEQ approval.

DCA NAME:

DCA CERTIFICATION NO.:

SIGNATURE:

DATE:

SOLAR SPECIFIC REQUIREMENTS

[ SEE DEQ GUIDANCE MEMO NO. 22-2012, SECTION 5.500. CROSS "X" OUT IF NOT APPLICABLE ]

I. INTERCONNECTION APPROVAL FOR SOLAR PROJECTS

\_\_\_ PANELS ARE CONSIDERED "UNCONNECTED IMPERVIOUS"

\_\_\_ PANELS QUALIFY AS "PERVIOUS" WITH INTERCONNECTION DOCUMENTATION AND EXPLANATION PROVIDED BELOW:

II. SOLAR PANEL ARRAY HORIZONTAL PROJECTED AREA

THE FOLLOWING EQUATION SHOULD BE USED TO DETERMINE A SOLAR PANEL'S HORIZONTAL PROJECTED AREA (HPA) WHEN PERFORMING EROSION AND SEDIMENT CONTROL, WATER QUANTITY, AND WATER QUALITY DESIGN COMPUTATIONS:

WHERE:

HPA = HORIZONTAL PROJECTED AREA (SQUARE-FEET)

L = SOLAR PANEL LENGTH (FEET)

W = SOLAR PANEL WIDTH (FEET)

θ = SOLAR PANEL MINIMUM OPERATING ANGLE FROM HORIZONTAL (DEGREES) FOR NORMAL OPERATIONS WITHOUT A RAIN SENSOR, OR THE MAXIMUM ANGLE FROM HORIZONTAL (DEGREES) WHEN A RAIN SENSOR IS DEPLOYED IN ACCORDANCE WITH DEQ GUIDANCE MEMO NO. GM 22-2012, SECTION 5.500 D

\_\_\_ NO RAIN SENSOR θ = \_\_\_

\_\_\_ RAIN SENSOR SYSTEM PROVIDED θ = \_\_\_

DOCUMENTATION OF DESIGN θ PROVIDED BELOW:

SHEET INDEX

- COVER SHEET
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APPROVAL BLOCK

DEQ PLAN # 20\_\_ - 0\_\_

DEPT. OF ENVIRONMENTAL QUALITY

DATE

DATE

REVISIONS

INITIAL

DESIGN PROFESSIONAL

DESIGN FIRM  
CONTACT NAME  
MAILING ADDRESS  
CITY, STATE ZIP  
TELEPHONE NO.  
EMAIL ADDRESS

PROFESSIONAL SEAL

[SIGNED & DATED]

PROJECT NAME

SECTION / PHASE #

CITY / TOWN / COUNTY, VIRGINIA

DEQ PLAN #

20\_\_ - 0\_\_

SHEET

1 OF XX